

Food and Drug Administration 10903 New Hampshire Avenue Document Control Center – WO66-G609 Silver Spring, MD 20993-0002

Byrne Medical, Inc. % N. E. Devine, Jr. Responsible Third Party Official Entela, Inc. 3033 Madison Ave. SE Grand Rapids, MI 49548

JUL 27 2015

Re: K033695

Trade/Device Name: Irrigation Channel Tubing System, Model 100135

Regulation Number: 21 CFR§ 876.1500 Regulation Name: Endoscope and accessories

Regulatory Class: II Product Code: OCX

Dated (Date on orig SE ltr): December 9, 2003 Received (Date on orig SE ltr): December 11, 2003

Dear Mr. Devine,

This letter corrects our substantially equivalent letter of December 23, 2003.

We have reviewed your Section 510(k) premarket notification of intent to market the device referenced above and have determined the device is substantially equivalent (for the indications for use stated in the enclosure) to legally marketed predicate devices marketed in interstate commerce prior to May 28, 1976, the enactment date of the Medical Device Amendments or to devices that have been reclassified in accordance with the provisions of the Federal Food, Drug, and Cosmetic Act (Act) that do not require approval of a premarket approval application (PMA). You may, therefore, market the device, subject to the general controls provisions of the Act. The general controls provisions of the Act include requirements for annual registration, listing of devices, good manufacturing practice, labeling, and prohibitions against misbranding and adulteration. Please note: CDRH does not evaluate information related to contract liability warranties. We remind you, however, that device labeling must be truthful and not misleading.

If your device is classified (see above) into either class II (Special Controls) or class III (PMA), it may be subject to additional controls. Existing major regulations affecting your device can be

found in the Code of Federal Regulations, Title 21, Parts 800 to 898. In addition, FDA may publish further announcements concerning your device in the <u>Federal Register</u>.

Please be advised that FDA's issuance of a substantial equivalence determination does not mean that FDA has made a determination that your device complies with other requirements of the Act or any Federal statutes and regulations administered by other Federal agencies. You must comply with all the Act's requirements, including, but not limited to: registration and listing (21 CFR Part 807); labeling (21 CFR Part 801); medical device reporting (reporting of medical device-related adverse events) (21 CFR 803); good manufacturing practice requirements as set forth in the quality systems (QS) regulation (21 CFR Part 820); and if applicable, the electronic product radiation control provisions (Sections 531-542 of the Act); 21 CFR 1000-1050.

If you desire specific advice for your device on our labeling regulation (21 CFR Part 801), please contact the Division of Small Manufacturers, International and Consumer Assistance at its toll-free number (800) 638 2041 or (301) 796-7100 or at its Internet address http://www.fda.gov/MedicalDevices/ResourcesforYou/Industry/default.htm. Also, please note the regulation entitled, "Misbranding by reference to premarket notification" (21CFR Part 807.97). For questions regarding the reporting of adverse events under the MDR regulation (21 CFR Part 803), please go to

http://www.fda.gov/MedicalDevices/Safety/ReportaProblem/default.htm for the CDRH's Office of Surveillance and Biometrics/Division of Postmarket Surveillance.

You may obtain other general information on your responsibilities under the Act from the Division of Small Manufacturers, International and Consumer Assistance at its toll-free number (800) 638-2041 or (301) 796-7100 or at its Internet address http://www.fda.gov/MedicalDevices/ResourcesforYou/Industry/default.htm.

Sincerely yours,

Benjamin R. Fisher -S

Benjamin R. Fisher, Ph.D.
Director
Division of Reproductive, Gastro-Renal,
and Urological Devices
Office of Device Evaluation
Center for Devices and Radiological Health

Enclosure

510(k) Number K 033695
Device Name: Irrigation Channel Tubing System.
Indications for use:
The Byrne Medical Irrigation Channel Tubing is used with the Byrne Medical Endo Gator System and connects to the output tubing from the pump and goes down the channel of an Endoscope. The Byrne Medical Irrigation Channel Tubing is provided sterile and is labeled for single use only.
Prescription Device:
Federal Law (US) restricts this device to sale by or on the order of a physician.
PLEASE DO NOT WRITE BELOW THIS LINE- CONTINUE ON ANOTHER PAGE IF NEEDED)
Concurrence of CDRH, Office of Device Evaluation (ODE)
Prescription Use OR Over-The-Counter Use (Division Sign-Off) Division of Reproductive, Abdomina and Radiological Devices 510(k) Number (No.336.95)
(Optional Format 1-2-96)

DEC 2 3 2003

510(k) Summary

Date: Nov 12, 2003

This summary of 510(k)-safety and effectiveness information is being submitted in accordance with the requirements of 21 CFR Part 807.92.

1. Company making the submission:

	Company
Name:	Byrne Medical, Inc.
Address:	2021 Airport Road
	Conroe, TX 77304
	800-490-9869
Telephone:	936-588-0392
Fax:	
	Don Byrne
Contact:	President
	Don@byrnemedical.com

2. Device:

Proprietary Name:	Irrigation Channel Tubing System
Common Name:	Endoscope and accessories
Classification Name:	Accessories, Cleaning, for Endoscope

3. Predicate Devices:

Device Name	Manufacturer	"K" #
Endo Gator™ System	Byrne Medical	K031773
Lsi Endoscope External	Lsi Solutions	K024301
Accessory		

4. Classification and Product Code: 21 CFR § 876.1500, Class II, 78 KOG.

5. Description:

100135 – Byrne Medical Irrigation Channel Tubing provides extension tubing to the EndoGator™ System to an Endoscope. The EndoGator™ System is utilized to provide fluid (water) to clean the Endoscope lens area.

The Endo Gator™ System tubing sets are sold as a sterile, single patient use device. It is packaged in a Chevron-style sterile barrier pouch with product label affixed to the clear side of the package.

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6. Indications for Use Statement:

The Byrne Medical Irrigation Channel Tubing is used with the Byrne Medical Endo Gator™ System and connects to the output tubing from the pump and goes down the channel of an Endoscope. The Byrne Medical Irrigation Channel Tubing is provided sterile and is labeled for single use only.

6. Summary of Technological Characteristics and Differences:

The Endo Gator™ Irrigation Channel Tubing system does not allow passage of additional endoscopic instruments, as does the Lsi Solutions device.

The Endo Gator System and the Irrigation Channel Tubing system and all predicate devices provide water to irrigator pumps or cauterizing units.

7. Contraindications:

The Endo Gator™ System is not designed, sold or intended for use except as indicated.

No other contraindications are known for this device.

8. Comparison:

The Byrne Medical Irrigation Channel Tubing System has the same device characteristics and the predicate devices. Difference between some systems is providing tubing sets sterile for single patient use. The Byrne Medical Irrigation Channel Tubing System allows only the passage of water from the pump.

9. Test Data:

The Byrne Medical Endo Gator™ Irrigation Channel Tubing system has been subjected to extensive safety, performance, and validations prior to release.

Bench testing was conducted utilizing Meditron UGI-3000B™GI Endoscopy Therapy System and Endolav® Endoscopic Lavage Pumps and EndoGator™ Cartridge and tubing sets.

Flow testing was completed at the minimum and maximum settings of the pump systems. Water flow was measured as a function of total volume over time. In each test the minimum pump setting produced 155 ml/min and maximum produced 650 ml/min with a measurement error of +/- 4%.

Pressure testing – EndoGator™ Irrigation Channel Tubing system was tested to 10 PSI without leaking or any other failure. The pump manufacturer's stated maximum pressure is 4.4 PSI.

10. Conclusions:

The conclusion drawn from these tests is that the Byrne Medical Endo Gator™ Irrigation Channel Tubing System is equivalent in safety and efficacy to its predicate devices.